



# General Permit for the Discharge of Stormwater Associated with Industrial Activities

## Stormwater Monitoring Report Form

### Facility Information

Name (owner, operator):		
Mailing Address:		
Business Phone:	ext.	Fax:
Contact Person:	Title:	
Site Address:		
Receiving Water (name, basin):		
Stormwater G.P. Registration # GSI	SIC Code:	
Check this box if the number of employees is 25 or less, or if operated by a municipality: <input type="checkbox"/>		

### Sampling Information

Sample Location:		
Collected:	Date:	Time:
Person Collecting Sample:		
Storm Magnitude (inches):	Storm Duration (hours):	
Date of Previous Storm Event:	Rainfall pH:	

### Monitoring Results

Parameter	Method	Results (units)	Laboratory
Oil & Grease			
pH			
COD			
TSS			
TP			
TKN			
NO <sub>3</sub> -N			
Total Copper			
Total Zinc			
Total Lead			
24-Hour LC <sub>50</sub>			
48-Hour LC <sub>50</sub>			

Attach separate page(s) to report additional parameters monitored pursuant to Part VI.C.1.a of the general permit.

### Statement of Acknowledgment

"I certify that the data reported on this document were prepared under my direction or supervision in accordance with the Stormwater General Permit. The information submitted is, to the best of my knowledge and belief, true, accurate and complete."	
Name of Authorized Facility Official (print or type)	Title (if applicable)
Signature of Authorized Facility Official	Date

# Stormwater Acute Toxicity Test Data Sheet

Sample Source:

Begin:

Date:

Time:

End:

Date:

Time:

Sample Hardness:

Sample Conductivity:

Dilution Water Hardness:

Test Species: *Daphnia pulex* < 24 hours old

Effluent Dilution	Number of Organisms Surviving			Dissolved Oxygen (mg/L)			Temperature (°C)			pH (su)		
	Hour			Hour			Hour			Hour		
	00	24	48	00	24	48	00	24	48	00	24	48
Control 1												
Control 2												
Control 3												
Control 4												
6.25% A												
6.25% B												
6.25% C												
6.25% D												
12.5% A												
12.5% B												
12.5% C												
12.5% D												
25% A												
25% B												
25% C												
25% D												
50% A												
50% B												
50% C												
50% D												
100% A												
100% B												
100% C												
100% D												

## Reference Toxicant Results

Test Species	Date	Reference Toxicant	Source	LC <sub>50</sub>
<i>Daphnia pulex</i>				

Please send completed form to:

WATER TOXICS PROGRAM COORDINATOR  
BUREAU OF WATER MANAGEMENT  
DEPARTMENT OF ENVIRONMENTAL PROTECTION  
79 ELM STREET  
HARTFORD, CT 06106-5127